



Docket Number: 1133279-0004

DECLARATION FOR PATENT APPLICATION

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled **SELF-EXPANDING STENT**

the specification of which is attached hereto unless the following box is checked:

☒ was filed on May 22, 2001 as United States Application Number 09/862,690
or International Application Number _____ and was amended on _____
(if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR § 1.56.

I hereby claim foreign priority benefits under 35 U.S.C. § 119(a)-(d) or § 365(b) of any foreign application(s) for patent or inventor's certificate, or § 365(a) of any PCT international application which designated at least one country other than the United States, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application(s)

Priority Not Claimed

Number	Country	Day/Month/Year Filed	

I hereby claim the benefit under 35 U.S.C. § 119(e) of any United States provisional application(s) listed below.

<u>60/206,211</u>	<u>May 22, 2000</u>
(Application Number)	(Filing Date)

I hereby claim the benefit under 35 U.S.C. § 120 of any United States application(s), or § 365(c) of any PCT international application designating the United States, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT international application in the manner provided by the first paragraph of 35 U.S.C. § 112, I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR § 1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.

(Application Number)	(Filing Date)	(Status--patented, pending, abandoned)
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(Application Number)	(Filing Date)	(Status--patented, pending, abandoned)
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I/we hereby appoint **Practitioners at Customer Number 007470** as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

Address all correspondence to **Customer No. 007470**

Telephone No.: 212-819-8200; Facsimile No.: 212-354-8113

Direct telephone calls to: Michael A. Davitz (Customer No. 007470, Telephone: 212-819-8862).

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believe to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Full name of sole or first inventor (first name, middle initial, last name): **Robert John Cottone, Jr.**

Sole or first inventor's signature  Date: 11.06.01

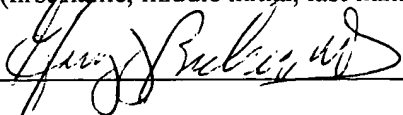
Residence: 618 S.W. 6th Street, Fort Lauderdale, FL 33315-1034 Citizenship : USA

Post Office Address:

☒ Additional inventors are named on the page attached hereto.

Full name of second inventor (first name, middle initial, last name): **Gary Jay Becker, M.D.**

Second inventor's signature



Date:

08/17/2001

Residence: 5925 S.W. 107th Street, Maimi, FL 33156

Citizenship: USA

Post Office Address:

Full name of third inventor (first name, middle initial, last name):

Third inventor's signature

Date:

Residence:

Citizenship:

Post Office Address: